



Applicantxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		and Adrienn	Gesztes	Attorney's #	1836.024844
Seria No.:	236,724		_ Filed or has week _ E	August 26, 1988	3
For: Liposomai	Local Anesthetic	and Anaigesi	e Products	<del></del>	
VED	HEIED STATEMENT	(DECLADATIO	N CLAIMING SM	ALL ENTITY OTA	THE
VEH	RIFIED STATEMENT		SMALL BUSINES		105
	(37 C.F.M. 1.9(1)	and 1.27(c)) —	SMALL BUSINES	3 CONCERN	
I hereby declare that I	am				
	the small business cond	cern identified belo	w: wc		
X an official of t	he small business cond	ern empowered to	o pon behalf of	concern identified	below:
				7)	
NAME OF CONCE	RN Mezei	Associates I	imited 3	<u> </u>	
ADDRESS OF CO	NCERN 14 Sta	arling Street	1988	1110	
	паша	x, Nova Scot	Canada A	NI IV8	
1 1		U business seess		II business seess	no defined in 10 C.F.D.
1 nereby declare that to	ne above identified sma ced in 37 C.F.R. 1.9(d), f	II DUSINESS CONCER	n qualifies as a sma	ii business concern der & 41(a) and (b) of	as defined in 13 C.F.H.  Title 35 United States
Code, in that the number	er of employees of the c	oncern, including t	hose of its affiliates,	does not exceed 500	persons. For purposes
of this statement, (1) the	e number of employees	of the business co	ncern is the average	over the previous fis	cal year of the concern
of the persons employed	ed on a full-time, part-tim ach other when either, o	ie or temporary ba	isis during each of th	e pay periods of the	iscal year, and (2) con-
	controls or has the por			ois of rias the power	to control the other, or
, , ,	ghts under contract or			with the emall busin	ness concern identified
above with regard to th	e invention, entitled1	iposomal Loc	cal Anesthetic	and Analgesic	Products
by inventor(s) Mic	hael Mezei and A	<u>Adrienn Geszt</u>	es		
described in the	specification filed herev	with.			
	ication serial no. 23		, file	d August 26,	1988
☐ pate	nt no.		, issued_		·
under 37 C.F.R. 1.9(d)	ess concern under 37 C or a nonprofit organizati oncern or organization h	on under 37 C.F.R	. 1.9(e). *NOTE: Sep	arate verified statem	ents are required from
				INDIVID	-· · <del>-</del>
ADDRESS	·				BUSINESS CONCERN
				LI NONPRO	OFIT ORGANIZATION
FULL NAME				🗆 INDIVID	141
ADDRESS			11 11 11 11 11 11		BUSINESS CONCERN
ABBITEOU				_	OFIT ORGANIZATION
small entity status prior	to file, in this application to paying, or at the time mall entity is no longer	e of paying, the ea	rliest of the issue fee	e in status resulting i e or any maintenance	n loss of entitlement to e fee due after the date
		,, , , ,	. , ,	hat all atatamants	ndo on information ====
	I statements made here e true; and further that				
	unishable by fine or imp				
	atements may jeopardi:	ze the validity of th	e application, any pa	tent issuing thereon,	or any patent to which
this verified statement	is directed.				
NAME OF PERSON SIG	NING	Michael Me	ezei		
TITLE OF PERSON OTH	IFR THAN OWNER	President, I	Mezei Associat	es_Limited	
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	SIGNING	<u>Halifax, No</u>	ova Scotia, Car	nadaB3M_1V8	
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SIGNATURE	rannos	Meres			Date Sept 29, 1480

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We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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Signature					Date	<b>)</b>
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Citizenship			<del></del>			
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